

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____ 2 Serial/Patent # 08/157193

3 Please refund the following fee(s):

4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<u>1</u>	<u>08 DEC 93</u>	<u>\$ 120</u>
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

<input checked="" type="checkbox"/>	Filing
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Extension of Time
<input type="checkbox"/>	Notice of Appeal/Appeal
<input type="checkbox"/>	Petition
<input type="checkbox"/>	Issue
<input type="checkbox"/>	Cert of Correction/Terminal Disc.
<input type="checkbox"/>	Maintenance
<input type="checkbox"/>	Assignment
<input type="checkbox"/>	Other

7 TOTAL AMOUNT OF REFUND \$ 120

8 TO BE REFUNDED BY:

10 REASON:

☒ Overpayment

☐ Duplicate Payment

☐ No Fee Due (Explanation):

☐ Treasury Check

☒ Credit Deposit A/C #:

9 23--0783

EPO SEARCH

11 REFUND REQUESTED BY: V. WALLACE

TYPED/PRINTED NAME: _____ TITLE: Paralegal

SIGNATURE: Vonda Wallace PHONE: 305-3765

OFFICE: POT

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: [Signature] DATE: 6/3/94

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B